



MIAMIBEACH

**PLEASE EMAIL REQUEST TO:**  
[researchrequest@miamibeachfl.gov](mailto:researchrequest@miamibeachfl.gov)  
or submit IN PERSON at address below

## **RESEARCH REQUEST FORM**

Requested by: \_\_\_\_\_

(Please print name clearly)

Department/Address: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ FAX NO: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_

SUBJECT/ITEM REQUESTED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RELEVANT DATES IF ANY: \_\_\_\_\_

(Be specific)

SPECIAL INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_

### **FOR OFFICE USE ONLY**

RR# Assigned: \_\_\_\_\_

Request received by: \_\_\_\_\_ Date: \_\_\_\_\_

Records **Custodian** Assigned to: \_\_\_\_\_

Contact/Department

Request Completed on: \_\_\_\_\_ Initials: \_\_\_\_\_

Status: Mailed ☐ Emailed ☐ Faxed ☐ Picked Up ☐ Other ☐

Notes: \_\_\_\_\_

### **CITY CLERK'S OFFICE-**

1700 Convention Center Drive, Miami Beach, Fla 33139 305-673-7411